

TAROLLI, SUNDHEIM, COVELL & TUMMINO L.L.P. 526 Superior Avenue – Suite 1111 Cleveland, Ohio 44114





PATENT

		Attorney Docket NoLM(F)6269
Commissioner fo P.O. Box 1450 Alexandria, VA		
	NEW APPLICATION	TRANSMITTAL
Transmitted here	ewith for filing is the patent application of Inventor(s):	Lori K. Lewis Rosemary D. Paradis Dennis A. Tillotson
For (title):	SELF-OPTIMIZING CLASSIFIER	
Enclosed are:		
1. Papers	s Required for Filing Date Under 37 CFR 1.53(b):	
37	Pages of specification	
1_	Pages Abstract	
9	Pages of claims	
4_	Sheets of drawing	
	☑ formal (Figs. 1-5)	
	☐ informal	
In addition to the	e above papers there is also attached: one Information and 28 docume	Disclosure Statement (2 pgs), one PTO 1449 Form (3 pgs) ents
	CERTIFICATION UNI	DER 37 CFR 1.10
United States Po	ostal Service on this date <u>July 2, 2003</u> umber <u>EU853429915US</u> ad	ents referred to as enclosed therein are being deposited with the in an envelope as "Express Mail Post Office to Addressee" dressed to the: Commissioner for Patents, P.O. Box 1450,
		Jill Wolfe
		(Type or print name of person mailing paper)
	\$	(Signature of person malling paper)
		•

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2.	Declaration or oath:									
	Ø	Enclosed								
		Not Enclosed.								
3.	Langu	juage:								
	\boxtimes	English								
		Non-English								
		A verified English translation of the								
		□ specification and claims								
		declaration								
		is attached.	is attached.							
				•						
4.	Assign	nment:								
	\boxtimes	An assignment of the invention to Lockheed Martin Corporation								
		☑ is attached.								
		☐ will fol	low							
5.	Certifi	ed Copy:								
			Certified copy (ies) of ap	plication (s)						
			•							
(Count	ry)		(Appln. No.)	(Filed)						
(Count	ry)		(Appln. No.)	(Filed)						
(Count	ry)		(Appin. No.)	(Filed)						
_										
from which priority is claimed										
		is attached								
		will fallow								

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6. Fee Calculation: (Small entity filing fee is 50% normal fee)

			CLAIMS AS FILED)	·		
Number Filed	1		Number Extra		Rate	Basic Fee \$ 750.00	
Total Claims	21	-20 =	1	×	\$ 18.00	18.00	
ndependent Claims	4	- 3 =	11	Х	\$ 84.00	84.00	
Multiple depe	endent claim(s), if a	any	···	+_	\$280.00		
	Amendment cand	celing extra claim	s enclosed				
	Amendment dele	ting multiple dep	endencies enclosed				
	Fee for extra clai	ms is not being p	aid at this time				
				Filing I	Fee Calculation	\$852.00	
7. Sma	II Entity Statemer	nt					
<u> </u>	☐ Verified statement that this is a filing by a small entity under 37 CFR 1.9 and 1.27						
	(Must be enclose	ed to get small er	tity filing fee reduction	on)			
	Payment Being M	lade At This Tin	ne:				
LIICH	036u.						
\boxtimes	basic filing fee					\$852.00	
\boxtimes	assignment reco	rdal fee				\$_40.00	
	for processing an application with a specification in a non-English language					\$	
				Total f	ees enclosed	\$892.00	
9. Meth	hod of Payment F	ees:					
⋈	check in the amo	ount of \$892.00		enclo	sed.		
⊠ our Deposit /	The Commission Account No. 20-009	er is hereby auth 90.	norized to charge any	DEFICIEN	ICY in the filing fee	es for this application to	
10. Instr	ructions As to Ov	erpayment:					
\boxtimes	refund		<i>a</i> ,	1	,		
& TUMMIN 526 SUPERI	OR AVENUE Su D, OHIO 44114-140 B) 621-2234	ite 1111	SIGNATURE OF Robert B. Sundhein Type or print name of at	ı	EY, REG. NO. <u>20</u>	,127	

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